24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 2 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Senate Majority PAC	C C00484642	
Check if X 24-hour report 48-hour report X New report X Amends report filled on		
Full Name of Payee Bully Pulpit Interactive	Date of Public Distribution/Dissemination	
· ·	10 J J J J J J J J J J J J J J J J J J J	
Mailing Address 1140 Connecticut Ave NW	Amount	
Ste 800 City State Zip	Code 30000.00	
_ ·	036-4010 Transaction ID : VN7GB9XN6C9 Date of Disbursement or Obligation	
Purpose of Expenditure Online Advertising	ategory/ Type M M / D D / Y Y Y Y	
Name of Federal Candidate	Support Office Sought: House District:	
Thomas Cotton	Oppose President Senate State: AR	
Calendar Year-To-Date Per Election for Office Sought 547548	Disbursement For: Primary	
Full Name of Payee	Date of Public Distribution/Dissemination	
SKDKnickerbocker	10 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 1150 18th St NW	Amount	
Ste 800		
	O Code 43894.56 Transaction ID: VN7GB9XN6B1 Data of Disbursement or Obligation	
Purpose of Expenditure Media Production Costs - Estimate Ca	ategory/ Type Date of Disbursement or Obligation	
Name of Federal Candidate	Support Office Sought: House District:	
Thom R Tillis	Oppose President Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2014 Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	73894.56	
(b) SUBTOTAL of Unitemized Independent Expenditures	······	
(c) TOTAL Independent Expenditures	······································	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Rebecca Lambe [Electronically	y Filed] Date 10 31 2014	
Signature		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)		PAGE 2 OF 2 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼	
Senate Majority PAC		C C00484642	
Check if 24-hour report 48-hour report New report Amends report filed on			
Full Name of Payee Waterfront Strategies	Date	e of Public Distribution/Dissemination	
Mailing Address 3050 K St NW	Amo	10 30 2014	
Ste 100	Alli	Junt	
	Code	274997.00	
3		nsaction ID: VN7GB9XH973 e of Disbursement or Obligation	
Purpose of Expenditure Media Buy Ca	tegory/ Type	M = M / D = D / Y = Y = Y	
Name of Federal Candidate	Support Office Sou	ght: House District:	
Scott Brown	Oppose Pres	ident Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought 340363		ent For: Primary ⊠ General Other (specify) ▶	
Full Name of Payee	Dat	e of Public Distribution/Dissemination	
		M M / D D / Y Y Y Y	
Mailing Address	Am	ount	
City State Zip	Code		
Oily State Zip	Code		
Purpose of Expenditure		e of Disbursement or Obligation	
Ca	tegory/ Type	M = M / D = D / Y = Y = Y	
Name of Federal Candidate	Support Office Sou	ght: House District:	
	Oppose Pres	ident Senate State:	
Calendar Year-To-Date Per Election for Office Sought	Disbursem	ent For:	
(a) SUBTOTAL of Itemized Independent Expenditures			
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures	· · ·	348891.56	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Rebecca Lambe	M M M	/ D D / Y Y Y Y	
[Electronically Filed] Date 10 31 2014 Signature			